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PTO/SB/05 (03-01)

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Approved for use through 10/31/2002 OMB 0651-0032

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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No. TBABetty Rozier First Inventor Site Guard for Intravenous Sites and Other Sensitive Areas

(Only for new nonprovision	al applications under 37 CFR 1.53(b))	Ex	press	Mail Label No.	EL	591889	979	US 5	
APPLIC		ASSISTANT Commissioner for Patents ADDRESS TO: Box Patent Application							
See MPEP chapter 600 cond		Washington, DC 20231							
The Transmittal Formula of the Computer of the]	Washington, DC 20231 7							
named in 1 63(d)(2) a		Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.							
6. Application Data S		17 X Other See I in Addendum							
18XIf a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1. 76: Continuation Divisional X Continuation-in-part (CIP) of pnor application No 09 608,648									
The incorporation can only be relied upon when a portion inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS									
Customer Number or Bar Code Label (Insert Costomer No. or Attach bar label here) Or X Correspondence address below									
Name	Christine M. Rebman								
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City	Chicago	St	ate	IL		Zip C	ode	60690-2828	
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Name (Print/Type)	Christine M. Rebman		Re	egistration No. (A	Attorney	//Agent)	P50:	546	
Signature	Christine M. Re	an			Date	1/	15/02		

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Addendum

1. unsigned Combined Declaration and Power of Attorney;

The Commissioner is authorized to charge our deposit account 13-0019 any additional fees or credits

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PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALLENTITY			OTHER TI SMALL E		
FOR NUMBER FILED NUMBER EXTRA							RATE	FEE		RATE	FEE		
BASIC FEE (37 CFR 1.16(a))							Attitutecolomics	\$ <u>370</u>	OR		\$		
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* If the difference in column 1 is less then zero, enter "0" in column 2							-	TOTAL	676	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								- ,	SMALLE	ENTITY	OR	OTHER T	
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	Independent (37 CFR 1.16(b))	*		Minus	***		=		x =		OR OR	x =	i
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3 ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".													
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